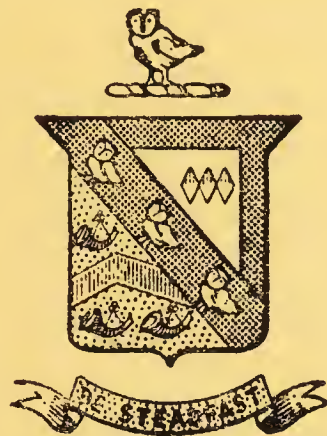


Libby
Mexborough Urban District Council



REPORT

ON THE

Health of the District

DURING THE YEAR ENDING

DECEMBER 31st, 1955

by

Dr. BARBARA R. A. DEMAINE

Acting Medical Officer of Health

together with the

**Report of the Chief Sanitary
Inspector**

Mr. H. BREARLEY



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MEXBOROUGH URBAN DISTRICT COUNCIL

MEMBERS AS AT 31st DECEMBER, 1955

Chairman of the Council :
Councillor T. ROEBUCK, J.P.

Vice-Chairman of the Council :
Councillor K. LEE

Chairman of the Public Health Committee :
Councillor W. H. F. DIXON

Councillors :

Mrs. F. BRADSHAW	J. SCHOFIELD
Mrs. D. LEACH	C. SENIOR
L. BOOTH	H. TRICKETT
M. DOUGHTY	D. WALTON
J. E. FISHER	J. H. WHITE
G. W. HURST	J. C. WILLETTS
J. S. MEEK	S. WORTH
G. S. MORLEY	

Acting Medical Officer of Health :
BARBARA R. A. DEMAINE, MB., CH.B., D.P.H.

Chief Sanitary Inspector and Director of Public Cleansing :
H. BREARLEY, CERT. S.I.B., M.S.I.A.,
Cert. Inspector of Meat and Other Foods

Senior Clerk (Divisional Public Health Department) :
P. GODDARD.

Chief Clerk (Sanitary Inspector's Department) :
P. H. WHITE.

DIVISIONAL HEALTH STAFF

Employed in the Mexborough Urban District

Divisional Medical Officer :

Acting Divisional Medical Officer :

Dr. BARBARA R. A. DEMAINE

Assistant County Medical Officer :

Dr. HELEN F. LINDSAY

Obstetrician :

Dr. J. C. MACWILLIAM

(Joint Appointment with Regional Hospital Board)

Child Health Specialist :

Dr. C. C. HARVEY

Mental Health Social Worker :

Mrs. F. H. REDMAN

Mental Health Home Teacher :

Mrs. P. WINSTANLEY

Health Visitors and School Nurses :

Mrs. E. APPLEYARD, Miss M. A. DONOGHUE,
Miss M. LLOYD, Miss H. WRAY.

Midwives :

Mrs. S. BEARDSLEY, Mrs. A. E. SMITH (Relief),
Mrs. M. TAYLOR, Miss N. TUNE.

Home Nurses :

Miss S. M. BEDFORD, Mrs. F. M. CHAPPELL,
Mrs. N. HARRISON, Mrs. H. A. MARRIOTT (Part-Time)

MEXBOROUGH URBAN DISTRICT COUNCIL

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH FOR THE YEAR 1955

To the Chairman and Members of the
Mexborough Urban District Council

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present the Annual Report for 1955, during which period I was your Acting Medical Officer of Health.

During the year, steady progress has been maintained, and there are some points to which I would like to give special mention.

Shortage of housing accommodation has slowed up Slum Clearance, and there still remains many instances of overcrowding and buildings in a state of disrepair. Priority has been given to tenants from Slum Clearance areas, and also to active cases of Tuberculosis.

Unfortunately, much house property which is privately owned is in a state of disrepair. The Local Authority can put up the rents of Council houses, but the amount allowed to private owners is not sufficient to allow for the necessary repairs to be carried out. This was brought forward in the Housing Repairs and Rents Act, 1954, but more incentive is needed.

In August a Five Year Plan was submitted to the Ministry, and several clearances have been carried out, and more will follow as new houses become available.

Another problem in this district is Smoke Pollution. Emission of excessive smoke implies an inefficient use of fuel. The Beaver Report estimated this waste at about 10 million tons a year in England and Wales. Smoke Pollution has increased rather than decreased and serious consideration will have to be given to this problem in the future, so that gas or electricity be considered to replace the coal to which the coal-miner is entitled.

Another increasing problem is the care of the aged. Institutional care is limited even in cases of dire need, but the ideal is to aim to deal with the aged in their own homes. The Home Nursing Service and Home Help Service have both played very valuable parts, but often it is difficult to give the necessary service, due to limited establishment, and difficulty in finding staff.

The difficulties will increase, for as a nation we are living longer due to control of diseases which took a heavy toll over a decade ago. Many old people now are not enjoying life to the full, on account of loneliness, and there is a great field for service here on the part of voluntary workers. Your district is particularly well catered for in Clubs for the aged, but many old people are too shy and retiring to avail themselves of these Clubs, but would appreciate an occasional visit from members of Voluntary Associations.

Midwifery Service

This service has been excellently maintained and no deaths occurred from Puerperal Causes during the year. The Infant Death Rate of 12·6 against the figures for England and Wales which are 24·9, is easily the lowest on record.

Dr. J. C. MacWilliam holds the appointment of Joint Obstetrician with the Local Authority, and Sheffield Regional Hospital Board, and this liaison is very helpful and satisfactory for the mothers.

The Health Visitors are expanding their services to include cases of Tuberculosis, and also all members of the community who require help and advice. Their efforts are held in high esteem both by the General Practitioners and the public.

Diphtheria

Again I would put forward a plea to have children immunized at their first birthday. From the statistics you will observe that the overall rate is 81·5%, but 92·8% is done between the ages of 5 and 14, so that the figure of 49·6% for infants is very disappointing.

The World Health Organisation points out that it is at the age of 4 years that Diphtheria generally represents the most serious threat to the health of children. In 1948, the

number of deaths from Diphtheria was 156. In 1955 they were reduced to 11. Justification indeed for carrying out a campaign of immunization against this disease.

One most formidable problem at present is the world wide distribution of Poliomyelitis. Not only is the incidence increasing, but there is still failure to control, and resulting disability. 10 million children in 5 different countries have already been vaccinated against Poliomyelitis with no ill effects, apart from the few in the United States which were traced to certain batches of faulty vaccine.

Quarantine of contacts is the obvious attack, and if children are excluded from school they must be excluded from parks and playgrounds as well, and if adults are quarantined, must not go to work nor to cafes and cinemas.

Compulsion is unpracticable, but persuasion and public opinion could do a lot, and it is the difficult task of the Medical Officer to reconcile what is medically desirable, with what is socially justifiable.

During the year, there has been very close co-operation between the General Practitioners, Hospitals and the Public Health Department. Dr. Harvey, the Paediatrician, has given us valuable help and stimulation at the Clinics held in our own Department.

I would like to express my sincere thanks to Mr. H. Brearley and his Staff for the loyal co-operation and courtesy extended to me during the year, and also to the Heads of the other departments who have willingly offered their assistance at all times.

I am deeply indebted to my own office staff for their cheerful co-operation and hard work during a year which had a background of uncertainty, and particularly to the Chief Clerk, Mr Goddard, for his assistance in compiling this report.

In conclusion I would like to thank the Chairman and Members of the Council for the kindness and courtesy extended to me during the year.

I am,

Yours faithfully,

BARBARA R. A. DEMAINE,

Acting Medical Officer of Health.

SECTION A

NATURAL AND SOCIAL CONDITIONS OF THE AREA

Area (in acres)	...	...	...	...	...	1,452
Registrar General's estimate of Resident Population mid-1955	...	...	...	...	...	18,870
Number of inhabited houses (31st December, 1955)						5,306
Rateable Value	...	...	...	...	...	£80,745
Net Product of a Penny Rate			...	...	...	£300
Height above sea level (in feet)			...	...	...	50-250
Rainfall for the year (in inches)			...	...	...	17.0
Number of days on which rain fell	...		...	...	...	121
Mean Temperature (degrees Fahrenheit)	...		...	...	...	49.34

The Registrar General's estimate of resident population for the middle of 1955 shows a decrease of 150 on the estimate for mid-1954 and a decrease of 370 compared with the year 1953.

There were 5,306 inhabited houses in the town at the 31st December, 1955, an increase of 35 over the year. The total increase in inhabited houses since 1948 is 276. The rateable value and the net product of a penny rate both increased slightly during last year, and both are higher than at any other time since 1947.

The annual rainfall was 9 inches less than in 1954, but the mean temperature rose very little and was about average.

SUMMARY OF VITAL STATISTICS FOR 1955

				Males	Females	Total
Live Births :	Legitimate	...	...	116	109	225
	Illegitimate	...	...	9	4	13
Still Births	...	...	...	3	3	6
Deaths of infants under one year of age				1	2	3
Deaths of infants under four weeks of age				—	2	2
Deaths of all ages	...	...	...	91	85	176
Birth Rate :	Crude	...	...	...	...	12.6
	Corrected	...	...	...	...	12.1
	(comparability factor 0.96)					

Death Rate : Crude	...	...	...	...	9.3
Corrected	...	...	...	...	11.2
(comparability factor 1.20)					

(The above rates are per 1,000 of the estimated resident population.)

Deaths of infants under one year per 1,000 registered live births	12.6
---	-----	-----	-----	-----	------

Still Births per 1,000 live and still births	24.6
--	-----	-----	------

Deaths from Puerperal Causes :

Pregnancy, childbirth, abortion	Nil
---------------------------------	-----	-----	-----

Live Births

A total of 238 births were registered in 1955, compared with 287 in the previous year. So far as can be ascertained, this is the lowest number of births registered in the town for many years, and the corrected Birth Rate of 12.1 compares with a Rate of 15.0 for England and Wales as a whole and a Rate of 14.5 for Mexborough in 1954.

There were 4 more illegitimate births registered during 1955 than in the previous year.

Deaths

A total of 176 deaths from all causes was recorded, an increase of 2 over the past year, and the second lowest total of deaths in the town since 1946. The corrected figure of 11.2 per 1,000 estimated population compares with a rate of 11.7 for the country as a whole and 11.0 for Mexborough in 1954.

The main causes of death were as follows :—

Diseases of Heart and Blood Vessels	...	92
Malignant Diseases	... ..	28
Pneumonia, Bronchitis and other diseases of the respiratory system	...	12

Deaths attributable to malignant diseases decreased by a total of 31 in 1954 to 28 in 1955, and this is the lowest number recorded since 1948.

Seven deaths were recorded from Cancer of the lung, 6 of these being males. Details of deaths from Cancer (all sites) during the past 6 years are shown below :—

Deaths from Cancer.

	1950	1951	1952	1953	1954	1955
	M. F.	M.F.	M. F.	M. F.	M.F.	M. F.
Malignant Neoplasm Uterus (F)	— 4	— 5	— 2	— 3	— —	— 1
Malignant Neoplasm Stomach and Duodenum	6 2	5 3	5 —	8 4	4 3	6 3
Malignant Neoplasm Breast	— 2	— 2	— 2	1 2	— 1	— 1
Malignant Neoplasm Lung, Bronchus	5 2	4 2	7 1	3 1	6 1	6 1
Malignant Neoplasm All other sites, including Leukaemia and Aleukaemia	13 5	14 3	16 5	8 5	10 6	7 3
Totals	24 15	23 15	28 10	20 15	20 11	19 9

As in 1954, there were 7 deaths from respiratory Tuberculosis and none from other forms of Tuberculosis for the fifth consecutive year.

Despite the outbreak of Acute Poliomyelitis in the town during the year, there were no fatal cases, and no deaths resulted from Diphtheria, Whooping Cough and Measles.

Whilst the number of deaths under the general heading “Diseases of Heart and Blood Vessels” increased to a total of 92 and accounted for over 50% of all the deaths registered, it is pleasing to note that there was a reduction by half of deaths from Pneumonia, Bronchitis and other diseases of the respiratory system, 24 fatalities being recorded in the previous year and only 12 in 1955.

The following Table details deaths from all causes which occurred during 1955 :—

DEATHS FROM ALL CAUSES DURING 1955

Cause of Death				Males	Fem.	Total
1.	Tuberculosis, respiratory	...	...	5	2	7
2.	Tuberculosis, other	...	...	—	—	—
3.	Syphilitic disease	...	...	1	—	1
4.	Diphtheria	...	...	—	—	—
5.	Whooping Cough	...	...	—	—	—

Cause of Death					Males	Fem.	Total
6.	Meningococcal infections	...	...		—	—	—
7.	Acute Poliomyelitis	...	...	...	—	—	—
8.	Measles	...	...	...	—	—	—
9.	Other infective and parasitic diseases				—	—	—
10.	Malignant neoplasm, stomach	...			6	3	9
11.	Malignant neoplasm, lung, bronchus				6	1	7
12.	Malignant neoplasm, breast	...	...		—	1	1
13.	Malignant neoplasm, uterus	...	...		—	1	1
14.	Other malignant and lymphatic neoplasms	...	...	...	6	3	9
15.	Leukaemia, aleukaemia	...	...		1	—	1
16.	Diabetes	...	...	...	1	—	1
17.	Vascular lesions of nervous system	...			10	9	19
18.	Coronary disease, angina	...	...		16	13	29
19.	Hypertension with heart disease	...			1	—	1
20.	Other heart disease	...	...	...	10	17	27
21.	Other circulatory disease	...	...		7	9	16
22.	Influenza	...	...	...	—	—	—
23.	Pneumonia	...	...	...	2	1	3
24.	Bronchitis	...	...	...	5	4	9
25.	Other diseases of respiratory system	...			—	—	—
26.	Ulcer of stomach and duodenum	...			—	2	2
27.	Gastritis, Enteritis and Diarrhoea	...			—	—	—
28.	Nephritis and Nephrosis	...	...		2	1	3
29.	Hyperplasia of prostate	...	...		—	—	—
30.	Pregnancy, childbirth, abortion	...			—	—	—
31.	Other defined and ill-defined diseases				5	15	20
32.	Congenital malformations	...	...		1	1	2
33.	Motor vehicle accidents	...	...		—	—	—
34.	All other accidents	...	...	...	2	1	3
35.	Suicide	...	...	...	4	1	5
36.	Homicide and operations of war	...			—	—	—
Total from all causes					91	85	176

Infant Mortality and Still Births

Three deaths of infants under 1 year of age were registered in Mexborough, easily the lowest number ever recorded. The Infant Death Rate was 12·6 per 1,000 registered live births, which compares with a rate of 41·8 for Mexborough in 1954 and 24·9 for England and Wales as a whole.

The Still Birth Rate at 24·6 per 1,000 live and still births is higher than the rate for 1954 when it was 20·5, and compares with a rate for England and Wales of 23·1. This rate is, therefore, not unsatisfactory.

The following Tables detail the causes of and age at death of the 3 infants who died under 1 year of age, and the time of year at which these deaths occurred :—

Infants under 1 year of age.

Cause of Death	AGE AT DEATH									
	Weeks				Months					
	Under 1	1-2	2-3	3-4	1-2	2-3	3-6	6-9	9-12	Total
Congenital Malformation	1									1
Prematurity	1									1
Broncho-Pneumonia.....							1			1
TOTAL	2						1			3

Infant Deaths.

January	1	} First Quarter 1
February ...	...	...	...	...	—
March ...	...	...	...	...	—
April	—	} Second Quarter 1
May ...	...	...	...	...	—
June ...	...	...	...	...	1
July	1	} Third Quarter 1
August ...	...	...	...	...	—
September ...	...	...	...	...	—
October	—	} Fourth Quarter Nil
November ...	...	...	...	...	—
December ...	...	...	...	...	—

Maternal Mortality.

I am again pleased to report that there were no maternal deaths in your District during the year.

SECTION B

GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA

Laboratory Facilities

Dr. L. A. Little is in charge of the Medical Research Council Laboratory at Wakefield, where facilities exist for the bacteriological examination of throat swabs and faeces samples for infectious diseases, the testing of water, milk and ice-cream samples, etc.

Blood samples for investigation of Rh factor and Kahn examinations are sent from the 5 Ante-Natal Clinics in the Division to the Regional Blood Transfusion Laboratory at Sheffield.

Ambulance Facilities

The Ambulance Service is under the control of the County Ambulance Officer, and the local Depot is situated at Dunford House, Wath-on-Dearne.

Midwifery and Maternity Services

(a) Institutional Midwifery

A total of 1,159 live births were registered during 1954 in the Divisional Area as a whole, and 45% of these, or a total of 518 live and still births, took place in Hospital. In 1955, 1,136 live and still births were registered in the whole area, of which 431 were institutional deliveries, or 38% of the total. Over the past year, therefore, there was a decrease of 7% in the number of institutional deliveries. This might infer that accommodation in Hospitals and Maternity Homes has not been adequate during the year, but there has in the past been a tendency to overbook cases for institutional delivery, particularly at the Montagu Hospital, Mexborough, where the majority of cases from this Division are referred. During 1955, bookings for Hospitals were even more selective than in the past, and with the fall in the number of bookings, there has not been the necessity in most cases to discharge patients from Hospital to the care of the Domiciliary Midwife before completion of the lying-in period.

Figures for institutional births occurring in the Divisional Area during the period 1st January to 31st December, 1955, were as follows :—

			Live Births	Still Births
Born in Hospitals	...	...	386	20
Maternity Homes	...	...	9	—
Nursing Homes	...	...	16	—
			<hr/> 411	<hr/> 20
			<hr/>	<hr/>

(b) Domiciliary Midwifery

The success of the Domiciliary Midwifery Service depends to a large extent upon harmonious relations between the General Practitioner and the Domiciliary Midwife, and in this respect we are fortunate in this area in maintaining the good co-operation which exists.

It has been noted in the previous paragraphs on Institutional Midwifery that the percentage of institutional deliveries has fallen during 1955 to the extent of 87 live and still births. Allowing for the fact that there were 23 fewer live and still births in the Divisional Area than in 1954, the number of deliveries carried out by Domiciliary Midwives in the area has still increased. 705 domiciliary live and still births were notified, and the Family Doctor was present at 59 deliveries. In addition to her attendance at the actual birth of the child, the Domiciliary Midwife's duties include attendances at Ante-Natal Clinics and visits to patients in their own homes during and after the confinement. Midwives in Mexborough made the following number of ante and post-natal visits to patients during the year :—

Ante-Natal Visits				
Domiciliary Cases	...	...	...	1,069
Hospital Cases	...	...	...	247
			Total	<hr/> 1,316
				<hr/>
Post-Natal Visits				
Domiciliary Cases	...	...	...	2,823
Hospital Cases	...	...	...	65
			Total	<hr/> 2,888
				<hr/>

Nine hospital cases were discharged home to the care of the Domiciliary Midwife prior to the fourteenth day.

In Mexborough, 3 Midwives and 1 Relief Midwife were employed during 1955.

(c) Ante-Natal Clinics

Ante-Natal Clinic sessions are held at the Mexborough Child Welfare Centre on Wednesday each week from 2 p.m. to 4.30 p.m., and 140 patients made 916 attendances. Additionally, Ante-Natal Relaxation Classes, supervised by 2 Midwives, were held in the Child Welfare Centre on Monday afternoons, at which there were 274 attendances. There was a fall in the number of patients and the number of attendances made at Ante-Natal Clinics in the town, compared with the previous year, but this decline corresponded with a fall in the birth rate.

Dr. J. C. MacWilliam was in medical charge at the Clinics, and he has submitted the following observations on his work during the year :—

“At the present time the improved results in obstetrics appear to be mainly due to more enlightened ante-natal and intra-natal supervision and to a general improvement in the health of the mothers. This latter being due to better conditions in the home and to improved nutrition. The expectant mother no longer waits until the last weeks of pregnancy before seeking medical advice, but avails herself early of the facilities for ante-natal care. In the past, supervision during pregnancy was confined to the detection of toxæmia, disproportion and malpresentation. This has now been outdistanced, and in modern practice the occasion is made an opportunity for raising the standard of health of the patient as a whole. Each expectant mother is encouraged to take up the free supply of Vitamins A and D and to buy the orange juice and a pint of milk daily at a greatly reduced price. At the County ante-natal clinics we supply routinely an iron preparation to correct the inadequate intake of iron in the diet. It is important to realise that a high haemoglobin level of the blood is equally necessary early in pregnancy as it is during labour and in lactation.

“In recent years great emphasis has been laid on the importance of nutrition during pregnancy and it is largely through our pre-natal clinics that the practical application of these nutritional principles can be taught. The instruction in diet and mothercraft is started at the patient's first visit

to the clinic. There is evidence that the foundations of the nutrition of the infant are laid in pre-natal life and that the first three months of intrauterine life are specially important. We are, therefore, continuing to recommend a liberal mixed diet rich in protein and vitamin content but low in carbohydrates. The necessity for painstaking advice is now greater than ever. During the war years the system of priorities ensured for the expectant mother her full and proper share of the essential foods. She should be advised how to buy, what to buy, and how to prepare the food bought.

“The relief of pain in labour will continue to be in the forefront of our minds. The administration of analgesic drugs, even when supplemented by inhalational analgesia, is not now considered adequate. This is because an anxious and unhappy patient is as miserable during labour as she is apprehensive before it. Therefore, the emotional reactions of the patient to her labour must concern us. Although there are many different methods of inspiring confidence in the patient (teaching her to relax, or instructing her in the anatomy of pregnancy and labour, are examples at present in vogue), it is an essential part of one's duty to dispel her anxieties and fears by adopting a kind and sympathetic attitude to her problems. It has been shown that relaxation and anatomy classes are not able to achieve anything that the kindness and sympathy of the patient's attendants in the ante-natal clinic and during labour cannot do. It should be emphasised that an important contribution is made to the patient's peace of mind by the promise of her practitioner or midwife that he or she will be present at the time of her labour and remain with her during delivery.

“The entire Public Health Service must do their utmost to bring about a well-developed social conscience towards positive health. Preventive medicine begins with the expectant mother and her unborn child. The education required for preventive and social medicine is too big a problem to be left entirely to the Public Health Authority. They must be joined by the instructors of the Educational Department and produce a closely integrated effort and thereby create a climate where a more satisfactory measure of response will be obtained.”

(d) Analgesia

Of the 146 cases confined at home in the District during 1955, 122 mothers were given Gas and Air Analgesia, and additionally 77 patients received injections of Pethidine. The percentage of mothers receiving analgesia was, therefore, 80%.

Child Welfare

(a) Infant Welfare Clinics

Infant Welfare Clinics are held in the Child Welfare Centre on Tuesdays and Thursdays each week from 2 p.m. to 4.30 p.m. Attendances at these sessions during 1955 were as follows (corresponding figures for the previous 3 years are also shown) :—

	1955	1954	1953	1952
Under 1 year of age ...	3,282	3,683	2,440	3,773
Over 1 year of age ...	1,234	1,633	2,269	1,706

In all, 244 children attended the Clinic during 1955, 141 of whom were under 1 year of age.

Whilst the main distribution centre for sales of welfare foods is the Divisional Public Health Office, supplies of National Dried Milk, Orange Juice, etc., are available for sale to mothers during infant welfare sessions at the Clinic. The following totals of these commodities were issued throughout the Divisional Public Health Area during 1955 :—

National Dried Milk, 30,058 tins
Orange Juice, 30,812 bottles
Cod Liver Oil, 5,962 bottles
A and D Vitamin capsules, 2,395 packets

Proprietary brands of welfare foods were also sold through the Child Welfare Centres.

(b) Health Visiting

Originally the primary function of the Health Visitor was to ensure that infants and young children were maintained in good health, but her sphere of activities has now been enlarged to cover the whole family group. The Health Visitor is a State Registered Nurse with training in midwifery and social welfare, so that she is very well qualified to take responsibility for health education, and advise on a multitude of social problems under all circumstances and at all ages.

With more income available and the improvement in housing conditions, environmental health problems are decreasing and the Health Visitor has consequently more time available for health education. Much of this can be done through group teaching at Clinics, but it is in the home of the parents where personal contact can best be obtained and where personal problems can best be discussed. Her advice is at the disposal of all the family, if necessary, and in this way she can help the family doctor considerably.

In the Mexborough District at the 31st December, 1955, 3 qualified Health Visitors and 1 Assistant Health Visitor were employed, and the following Tables analyse the work undertaken by these Nurses during the year :—

544	No. of families or households visited for the first time this year during the month																		
580	No. of Children under 5 years of age visited for the first time this year during the month																		
—	HEALTH VISITING																		
—																			
226											Expectant Mothers		1st Visits		Children, aged Under 1 yr.		1-2 yrs.		T.B. Household
3220													Re-Visits				2-5 yrs.		
1177											Total Visits		Total Visits						
1407											Total Visits		Total Visits						
101											Total Visits		Other Cases						
3817											Total Visits								
370											Maternity and Child Welfare		L.H.A.						
125											U.V.L.								
—	Parentcraft in Schools																		
24	Chest	Specialist		School															
30	Other																		
22	Minor Ailments		School																
10	Special Defects																		
91	Medical Inspections		Schools																
18	Cleanliness Surveys																		
68	Special Visits																		
273	Infectious Diseases		Home Visits																
—	Handicapped Pupils																		
32	Neglected, verminous, etc.																		
11	Routine M.I. follow-up																		
33	Other Visits																		

(c) Illegitimate Children

The difficulties arising from illegitimate pregnancy are many. The emotional stresses are much greater than those associated with an ordinary pregnancy and the unmarried mother realises that her position in the community is not usually looked upon favourably. It is, therefore, essential that even greater sympathy and understanding be extended to the unmarried mother and every effort made to ensure that the unborn child is properly cared for.

In dealing with these cases we are fortunate in this Area to receive the ready co-operation of the Diocesan Moral Welfare Committee and their Social Workers. During 1955, 13 illegitimate children were registered in the Mexborough District, and all these cases were followed-up to ascertain that the child was being satisfactorily cared for.

MENTAL HEALTH SERVICE

The following patients were being supervised under the Mental Deficiency Acts in your District during 1955 :—

Under Statutory Supervision ...	...	21
Under Voluntary Supervision...	...	4
Under Guardianship ...	...	1

The above figures include 1 patient newly ascertained during the year.

Additionally, after-care service was provided for 3 patients, discharged from Mental Hospitals, at their own request. Where possible, training facilities were provided for those patients considered to be suitable, and 2 children from Mexborough attend Doncaster Occupation Centre daily. 10 children attend group training classes which are held in the Child Welfare Centre, Mexborough, on Wednesday and Thursday mornings each week from 10 a.m. to 12 noon. The Mental Health Home Teacher also provided training materials and instructions in their use at home to 8 patients.

One patient was admitted to an Institution for short-term stay accommodation during the year, and this enabled the parents to take a much needed rest.

The Mental Health Social Worker, whose duties include the supervision of ascertained patients and visits to patients discharged from Mental Hospitals, submitted 35 reports on home conditions in respect of patients detained in Institutions.

There were no fresh admissions to Institutions of patients from Mexborough during the year, and there were no urgent vacancies required at the end of 1955.

CARE AND AFTER CARE

Home Nursing

The 3 Home Nurses employed in the town during 1955 made 9,718 visits to patients. This is nearly 3,000 visits fewer than in the previous year, and is the lowest total since 1950.

A detailed analysis of these visits and the types of cases nursed is given below :—

NEW CASES

AGE GROUPS			CLASSIFICATION					
0-5	5-65	65+	Medical	Surgical	Infectious Diseases	Tuberculosis	Maternal Complications	Total
6	159	92	194	50	—	12	—	257

VISITS

AGE GROUPS			CLASSIFICATION					
0-5	5-65	65+	Medical	Surgical	Infectious Diseases	Tuberculosis	Maternal Complications	Total
38	4607	5073	7969	1226	—	523	—	9718

It will be noted that over a half of the total visits were made to patients over 65 years of age, and the case load in this age group is increasing with the general ageing of the population. Bearing in mind that as a rule these aged people usually require general care and daily toilet, the time spent at each visit is appreciably longer than in the average case. Consequently it is probably true to say that at least two-thirds of the Home Nurses' time is spent in providing nursing care for aged persons, and even so, the service these patients are at present receiving, is probably only the minimum required to ensure their comfort.

Nurses have at their disposal for loan to patients, a number of items of nursing equipment such as rubber sheets, bed pans and bed rests, with the object of increasing the patients' comfort and simplifying the nursing procedure. Other major items of equipment such as wheel chairs, special beds, Dunlopillo cushions, spinal carriages, etc., have also been made available where these have been considered essential.

There have been several changes owing to resignations and sickness in the staff employed in the town during the year, and the life of the Home Nurse in recent years has been a busy one, resulting in overwork and sickness.

Hospital After-Care

It has been found that the most effective way to obtain liaison with the Hospital Service is to send a Health Visitor to visit the Hospital frequently to arrange the provision of (i) background reports for the use of the medical staff, (ii) assistance to patients whilst they are still in Hospital, and (iii) assistance after they are discharged.

Miss D. M. E. Goldthorpe, a Health Visitor from this Division, attends the Montagu Hospital, Mexborough, on Wednesday and Friday afternoons of each week to undertake these duties. That her assistance is frequently sought outside these hours by the medical and nursing staff at the Hospital is evidence of the success of this scheme.

A special point is made of keeping the Family Doctor of the patient informed as to the services being provided for the patient by the Local Health Authority consequent upon the visits of the Liaison Health Visitor.

The following Table, which summarises Miss Goldthorpe's work during the year, indicates the extent of the Hospital After-care Service as provided in this Area :—

SUMMARY OF WORK

Number of Sessions at the Hospital	...	...	99
Number of additional visits to the Hospital	...	...	1
Approximate total time spent at Hospital			176 hours

Background Reports provided for the Medical Staff

Number of requests received from Hospital	...	161
Number completed and returned to Hospital	...	128

Assistance to Patients while in Hospital

Number of patients interviewed	54
Number of patients requiring assistance ...	53
Number dealt with satisfactorily before discharge	53
Number being dealt with on discharge and referred for after-care	206
Number for whom help could not be afforded ...	—

Assistance to Patients after leaving Hospital

(a) Number of patients referred to Divisional Medical Officer for after-care upon discharge from Hospital	206
(b) Number where action has been taken ...	200
(c) Number where action has not been taken ...	6
(d) Number outstanding on completion of this return	—

DETAILS OF WORK

After-care Work - Details of Assistance afforded by the Health Department of the Area to which the patient is discharged

	No. of Cases
Assisted by Midwife	—
Assisted by Home Nurse	39
Assisted by Health Visitor	149
Nursing equipment provided	1
Home Help arranged	14
Home visits by Liaison Officer	32
Environmental investigation undertaken	153
Rehabilitation arranged	10
Referred to Convalescent Homes	2
Transfers to hospitals or homes for chronic sick ...	2
Transfers to other hospitals	1
Follow-up visits	2

Category of Patients assisted

	No. of Cases
Baby—Premature up to 5½ lbs.	7
Normal over 5½ lbs.	25
Children—12 months to 14 years	84
Adolescent—14 years to 18 years	2
Adult—18 years	35
Chronic Sick—Persons in need of nursing care over a long period	40
Aged and Infirm—Any infirm from over 65 years	15
Handicapped—Blind; deaf and dumb; cripples; illness, injury or congenital deformities, or such other illnesses as are prescribed by the Minister under the provision of Section 29 of the National Assistance Act	—

General Hospital Services are provided by the Montagu Hospital, Mexborough, Barnsley Beckett Hospital and Moorgate General Hospital, Rotherham.

Home Help Service

The equivalent of 28 full-time Home Helps were authorised to work in the whole of this Divisional Area during 1955. In your District a total of over 21,000 hours were worked at 116 households, representing the equivalent employment of 9 full-time Home Helps, and amounting to over 1 hour per year per head of population. In view of the number of families requiring assistance, full-time Home Helps are not employed, and an average of 55 part-time women are engaged throughout the Division.

17,943 hours were worked by Home Helps attending chronic cases, the bulk of which are aged people, and this represents over 80% of the total hours worked. The service plays an important part in the welfare of the aged population, and present trends indicate that it will be necessary to expand the service even more in future years, to cope with the problem of the aged.

Whilst in such a developing service it is impossible to please everyone, the number of complaints are relatively few.

The following Table shows the number of hours of home help provided, and the number of cases assisted in the various categories during 1955 :—

	Hours	Cases
Chronic sick	17,943	94
Tuberculosis	1,855	6
Maternity	767	8
Others	1,140	8

SCHOOL HEALTH SERVICE

Owing to carrying out the duties of Divisional Medical Officer during 1955, I was unable to devote the necessary time to the schools in Mexborough and the Dearne. I was able to carry out the examination of school leavers for the Youth Employment Officer, and also Diphtheria immunisations and ascertainment of Handicapped Pupils. The routine examinations were carried out by Part-Time Assistants on four sessions per week. I was grateful for the help given by Dr. Margaret Harvey from May to July, and by Dr. Edith Burton from September to December, and with the exception of B.C.G. vaccination, the work is now up-to-date.

Dr. H. F. Lindsay, Assistant County Medical Officer, has made the following observations on the work of the School Health Service, during 1955 :—

“This year has seen the introduction of the examination of the 7 to 8 years of age group, making four examinations in the life of the school-child. It has the great advantage in that it allows for assessment after the child has become really established in school life, and before any defect which may have arisen has become serious.

“The general health has been well maintained, and the number of Physically Handicapped children is comparatively small. School dinners, milk and halibut oil capsules, along with better wages for the parents, have made the school child of to-day a very different entity to that of even immediate pre-war years. Most look healthy and are well clothed. Unfortunately in an industrial district, there is still a minority of whom this is not true. Mostly this is due to being a member of a large family, or in some cases, through ignorance and mismanagement in the home.

“**Minor Ailments.** These are treated regularly in clinics, although the number requiring treatment is much smaller than formerly, largely due to better hygiene and the use of the new drugs.

“**Ear, Nose and Throat conditions.** Children referred to the Specialist have been carefully selected, but in spite of this the waiting time for operative treatment appears to be again extending.

“**Defective Vision.** The testing of cases of defective vision and the supply of any glasses required, seem to have had less time lag than formerly. Many children have attended the Orthoptic clinic at Rotherham.

“Dental Service. This service is well used and it is to be regretted that the day still seems far distant when it can be offered to all school children.

Whether the great increase in pocket money given to school children can be held responsible or not, the amount of caries in the young child appeared very much worse this year.

“Paediatric Clinic. This monthly clinic continues to be appreciated as it allows for consultation with difficult cases and also a regular check-up of progress.

“Orthopaedic Clinic. Cases are referred when necessary; mostly these are cases of foot conditions or bad posture.

“Chest Clinic. Children found to have a positive tuberculin jelly test reaction are referred for a check-up. The liaison of the Health Visitor to both Chest Clinic and School Medical Services has proved of great advantage in the following up of contact cases.

“Head Hygiene. Unfortunately there is one pest, the head louse, in the eradicating of which we have not yet been able to obtain the full co-operation of some parents. There is a small hard core of offenders in most schools, but it is particularly distressing to find this among some of the older girls, including school leavers. No amount of hard work by the School Nurse seems to make any lasting improvement in this group, and one feels that re-infection must take place in the home. The flea which was once so much in evidence at school medical inspections was more easily banished than the head louse, perhaps partly due to modern hairstyles with the frizzy permanent wave.

“Educationally subnormal children. The provision for the education of these children still falls very short of the requirements. The progress of some of these children is retarded by frequent absences from school for the most trivial reasons. The parents of some children seem to value lightly the place provided in school for their children at much cost. Many of these children have failed to be able to read or write even as late as 9 or 10 years of age, and whilst they may not have an I.Q. sufficiently low to warrant a place in a special school, they do require special tuition which seems unobtainable in an ordinary school, because of staffing difficulties.

“Immunisation against Diphtheria. This has continued during the year with the exception of the summer months.

Many school entrants have required full protective doses in spite of much pleading by Doctors and Health Visitors for the protection of the child in the vulnerable pre-school period.

“**Juvenile Employment Bureau.** The linking up between this office and the school medical service is of great value in the placing in suitable employment of children who are handicapped.

In conclusion I would like to express my appreciation of the great amount of work done and interest taken in these children by our Health Visitors and School Nurses.”

SECTION C

PREVALENCE AND CONTROL OVER INFECTIOUS DISEASES

Notifiable Diseases other than Tuberculosis

Cases of infectious diseases requiring hospital isolation were admitted to Kendray Isolation Hospital, Barnsley, and Doncaster Isolation Hospital, and the accommodation provided was adequate to meet all needs.

The most serious outbreak during the year was of Acute Poliomyelitis, in respect of which 22 notifications were received; 11 cases of Paralytic Poliomyelitis and 9 of Non-Paralytic Poliomyelitis were confirmed. The attack rate of 1.16 per 1,000 population was the highest in the country. Up to and including week ended 12th November, 1955, 338 original notifications of Poliomyelitis had been received in respect of the Administrative County of the West Riding, and only 16 out of the 89 County Districts had not had any notified cases. The peak of the epidemic was reached at the beginning of September. The confirmed cases in Mexborough were distributed as follows :—

Under school age	...Paralytic	3	Non-Paralytic	1
Children of school age	„	4	„	8
Adults	... ..	4	„	—

It was not found possible to draw any firm conclusion as to the possible source of infection and the mode of spread, but the following points are of interest :—

The first case notified in Mexborough proved to be most serious and occurred in a child aged 6, who was notified on the 13th July, 1955.

It was noted that there were cases notified amongst children living in streets adjoining or near to the 5 recreation grounds in the town. Three of these are provided with conveniences, but no facilities are available for washing hands. Sand-pits are provided in each of the playing grounds. Five of the children were play-mates, and the possibility is that they infected each other. A married woman was notified as suffering from Paralytic Poliomyelitis on the 20th July, and during her stay in Hospital it was arranged that her young children should be boarded out with her in-laws at another address. She was discharged from Hospital on the 9th August, and on the 20th August her 18 year old brother-in-law, who was resident at the address where her children had been boarded out, was notified as a case of Paralytic Poliomyelitis.

In another case a boy aged 4 was notified on the 14th September as a case of Non-Paralytic Poliomyelitis, and 7 days later a married woman aged 33 living next door but one, was admitted to Hospital and the diagnosis was confirmed as Paralytic Poliomyelitis. So far as it can be ascertained, no personal contact between the affected person could be established.

During the first three weeks of September, when incidentally the St. Leger Race Meeting is held at Doncaster, 9 cases of Poliomyelitis were confirmed in Mexborough, 1 in Conisbrough and 3 in the Dearne Urban District.

Although Mexborough carried a higher number of cases than the neighbouring towns, populations are of equal standards. The District is densely populated with a population of over 19,000 in an area of 1,450 acres. Several areas are marked for slum clearance, and the atmosphere is supercharged with sulphur-dioxide. It is, however, on the direct bus route from Barnsley, where a similar outbreak occurred, and there are daily direct supplies of milk and meat from Barnsley into Mexborough. The town is also the rail junction for rail services to and from Barnsley.

Routine preventive measures were taken as follows :—

On receipt of a notification of a suspected case of Poliomyelitis, a visit to the home was made by the Sanitary Inspector and a Health Visitor, and all immediate child contacts were excluded from school for 3 weeks and home and garden quarantine recommended. Parents of other child contacts were advised to call in their Doctor immediately should the child appear unwell, and disinfection of the house and school premises was carried out. Where immediate adult contacts

were employed in occupations which concerned handling food supplies to the public, or brought them into contact with groups of young children, exclusion from work was recommended for a period of 3 weeks. Four such cases were dealt with, and due to the generosity of their employers, they suffered little financial loss as a result of their exclusion from work.

Immunisations were suspended both in schools and clinics, and any unnecessary gatherings or functions at school, such as harvest festivals and jumble sales were cancelled. The District Council co-operated by posting alongside rivers and canals suitable warning notices advising people not to bathe in these waterways.

Most of the cases were of a mild nature, and only in one or two cases has there been any report of serious residual paralysis. Fortunately, no deaths occurred in the District from Poliomyelitis.

An outbreak of Sonne Dysentery also occurred in the town during the first 4 months of the year, but the cases were of a mild nature and the cause could not be established. Whilst the number of cases of Scarlet Fever increased slightly from 65 in 1954 to 76 in 1955, notifications of Whooping Cough and Measles were only about half the total for the previous year. The following Tables detail the number and types of infectious diseases other than Tuberculosis notified in the town and the age distribution of these cases :—

INFECTIOUS DISEASES
Notifiable Diseases (other than Tuberculosis) during 1955
Mexborough

Disease	Total Cases Notified	Cases After Correction
Scarlet Fever	76	76
Whooping Cough	38	38
Acute Poliomyelitis (Paralytic)	13	11
(Non-Paralytic)	13	9
Measles	86	86
Acute Pneumonia	23	23
Dysentery	43	43
Erysipelas	2	2
Meningococcal Infection ...	7	7
Puerperal Pyrexia	2	2
Food Poisoning	4	4

Infectious Diseases (Corrected) 1955

Age Distribution—Mexborough

AGE	Scarlet Fever	Whooping Cough	Acute Polio-myelitis		Measles	Pneumonia	Erysipelas	Meningococcal Infection	Puerperal Pyrexia	Dysentery	Food Poisoning
			Paralytic	Non-Paralytic							
Under 1 year	1	3	—	—	3	—	—	—	—	—	—
1-2 years	6	8	1	—	21	2	—	3	—	9	—
3-4 years	11	11	4	4	27	1	—	—	—	10	—
5-9 years	44	14	1	5	30	4	1	3	—	3	2
10-14 years	11	—	1	—	4	2	—	—	—	7	—
15-24 years	3	—	3	—	1	6	—	1	2	2	2
25 and over	—	2	1	—	—	8	1	—	—	12	—
TOTAL	76	38	11	9	86	23	2	7	2	43	4

Vaccination and Immunisation

It is again pleasing to report the absence of notifications of or deaths from Diphtheria, but to maintain this satisfactory position it is considered essential to secure the immunisation of not less than 75% of all babies before their first birthday. Reference to the following Table shows that just over 49% of all children under 5 years of age are fully protected against Diphtheria, and although this is an improvement on the rate for last year, is still far from satisfactory.

The rate for children attending school between the ages of 5 and 14 is nearly 93%, which indicates that there is no hostility to the Immunisation Scheme. We must convince parents that the first five years of the child's life are the most vulnerable where Diphtheria is concerned, and the little extra effort required to take the child to the Family Doctor or to the Clinic is well worth while.

Only 40 persons in the town were vaccinated against Smallpox during the year, and this too is unsatisfactory. Few children will be protected should an outbreak of Smallpox occur unless there is a radical change of heart in favour of vaccination.

May I again remind parents that free facilities for immunisation against Diphtheria and Whooping Cough, and vaccination against Smallpox are available at the Child Welfare Centre if they attend on Tuesdays between 2.00 and 4.30 p.m. or if they attend at their Family Doctor's surgeries.

STATISTICS RELATING TO DIPHTHERIA IMMUNISATION AND VACCINATION

FOR THE YEAR ENDING 31st DECEMBER, 1955.

DIPHTHERIA IMMUNISATION

Urban District	No. of Children Immunised in 1955			No. of Children Immunised at any time up to 31/12/55			Estimated mid-year population in 1955			Percentage Rate		
	under 5 yrs.	5-14 years	Total	under 5 yrs.	5-14 years	Total	under 5 yrs.	5-14 years	Total	under 5 yrs.	5-14 years	Total
	198	207	405	608	3197	3805	1224	3444	4668	49·6	92·8	81·5
Mexborough U.D.												

VACCINATION

Mexborough U.D.	Under 1 yr.	1-4 years	5-14 years	15 years and over	Total
Primary	7	13	—	14	34
Re-Vaccination	—	—	—	6	6

Tuberculosis

Eleven cases of Pulmonary Tuberculosis and 3 cases of Non-Pulmonary Tuberculosis were newly notified during the year, the lowest number since 1947.

As in 1954, there were 7 death from Pulmonary Tuberculosis, and for the fifth year in succession there were no deaths from other forms of Tuberculosis.

The Chest Clinic at Whateley House, Cemetery Road, Mexborough, is under the medical charge of Drs. F. C. N. Holden and R. L. Sadler, and arrangements are in force whereby a Health Visitor attends at the Chest Clinic each morning of the week to consult with the Medical Staff regarding the care of tuberculous patients, and to discuss ways and means of preventing spread.

About 60 patients in Mexborough were provided with extra nourishment in the form of 2 pints of milk per day, and 1 patient was supplied with bed and bedding to effect bedroom segregation from the rest of this family. Seven children who were known to be contacts of a case of Tuberculosis were given B.C.G. vaccination at the Chest Clinic and segregated from their families for a period of 6 weeks.

A great deal of contact tracing was carried out by the Health Visitors during the year, and they made 101 visits to households where there was a notified case of Tuberculosis.

Accommodation in Sanatoria was obtained more easily for female patients than for males, but in neither case was the waiting period excessively long. The Tuberculosis Ward at the Montagu Hospital was opened during the year, for the admission of female patients.

The Doncaster Tuberculosis Care Committee provided generous assistance to patients in the town by the provision of clothing and items of extra nourishment where financial circumstances were poor. Additionally the Mexborough Town Nursing Association agreed to assist where necessary.

Close liaison was maintained between the Chest Clinic, General Practitioners and the Public Health Staff in all matters relating to the treatment and control of Tuberculosis in the town during the year.

Tables follow detailing the number of deaths and new notifications of Tuberculosis in Mexborough since 1945, and the age groups in which deaths and new cases occurred which were recorded during 1955 :—

DEATHS FROM TUBERCULOSIS

Year	Mexborough U.D.	
	Pulmonary	Non-Pul.
1946	12	1
1947	5	4
1948	9	2
1949	13	—
1950	9	1
1951	12	—
1952	6	—
1953	6	—
1954	7	—
1955	7	—

NOTIFICATION OF TUBERCULOSIS (NEW CASES)

Year	Mexborough U.D.	
	Pulmonary	Non-Pul.
1946	20	2
1947	11	—
1948	23	2
1949	29	1
1950	18	4
1951	26	1
1952	29	3
1953	17	1
1954	15	2
1955	11	3

TUBERCULOSIS — NEW CASES AND MORTALITY DURING 1955

NEW CASES

Age Periods	Pulmonary		Non-Pulmonary	
Years	M	F	M	F
0—1	—	—	—	—
1—5	1	—	—	—
6—15	—	1	—	—
16—25	3	1	—	—
26—35	—	—	—	2
36—45	1	—	—	—
46—55	1	—	—	1
56—65	1	—	—	—
66 and over	2	—	—	—
TOTALS	9	2	—	3

DEATHS

Age Periods	Pulmonary		Non-Pulmonary	
Years	M	F	M	F
0—1	—	—	—	—
1—5	—	—	—	—
6—15	—	—	—	—
16—25	—	—	—	—
26—35	—	—	—	—
36—45	—	2	—	—
46—55	2	—	—	—
56—65	2	—	—	—
66 and over	1	—	—	—
TOTALS	5	2	—	—

MEXBOROUGH URBAN DISTRICT COUNCIL

ANNUAL REPORT OF THE CHIEF SANITARY INSPECTOR FOR THE YEAR ENDING 31st DECEMBER, 1955

To the Chairman and Members of the
Mexborough Urban District Council

Mr. Chairman, Ladies and Gentlemen,

I beg to present my Annual Report on the work of the Department for the year ending December, 1955.

Sanitary Circumstances of the Area

Once again, housing was the major problem, though, in my opinion, the situation may not be quite so bad as it might first appear. It was found that several applicants on the Council's Housing List were still no longer interested in obtaining a Council owned house and it is felt that the Housing List might be considerably reduced. 44 Reema type houses were erected on the Highwoods Estate and work proceeded on further extensions to the site. In addition, preparatory work was carried out to the Clayfield Road site to enable further housing work to be done. The Council agreed to erect 42 Reema type houses on this site to rehouse the families from the Clayfield Road and New Street Clearance Areas. This site can be further developed at a later stage. The total number of houses in the District was 5,306, which included some 26 back to back houses. The Registrar General's mid 1955 estimate of the resident population was 18,870.

It was realised that difficult housing sites were going to delay new house building and consequently the rate of Slum Clearance would be slowed up. The Council decided to include 294 sub-standard houses in the 5 year Slum Clearance programme and several of these are in a very worn out and decrepit condition and should have been scheduled in 1939.

There was no shortage of water, an adequate supply being obtained from Sheffield Corporation to supplement the Council's own supply, and the new surface water sewer, which was completed during the year, certainly remedied flooding after heavy rain, in the south west area of the township. There are still inadequate sewers in other parts of the town and the sewage works is in need of extension and reconditioning.

Water Supply

1955 was the first full year in several that a full and adequate water supply was available. The Council's own supply from the Bore Hole in Pitt Street and the Ludwell Springs at High Melton did not yield enough water to cover the town's needs but an unlimited supply from Sheffield enabled all needs to be met. 27 samples of water were taken for bacteriological examination and 1 for chemical examination and these resulted as follows :—

No. of Bacteriological Samples—

Satisfactory	...	...	...	...	24
Unsatisfactory	...	...	...	...	3

No. of Chemical Samples—

Satisfactory	..	...	...	...	1
Unsatisfactory	...	...	...	...	Nil

Difficulties were experienced in the Roman Terrace district of the town, where several service pipes were silted up and some houses had practically no supply at all. This part of the township is supplied by the Swinton Urban District Council and as the Swinton Council had lost an appeal at Quarter Sessions on a notice served on an owner under Section 93 of the Public Health Act, 1936, the Property Owners Association had advised their members not to carry out the necessary work to their water service pipes. The Mexborough Council, however, decided to serve notices under Section 93 of the Public Health Act, 1936 on owners and were prepared for appeals to High Court. Notices were served in respect of 17 houses and these were all complied with by the owners, without need for Court action.

Sewage Disposal

The worth of the new surface water sewer in the Wath Road and Swinton Road areas after periods of heavy rain was proved. There are still other areas, however, for example Tennyson Avenue, where the sewers are inadequate at periods of heavy rain. This problem is one which will have to be tackled in the near future, with consequent improvements of the sewage works in Pastures Road.

Sanitary Inspections of the District

The following inspections were carried out during the year.

Nature of Inspection									No. of Inspections
Factories	...	...	...	...	...	...	...	...	73
Bakehouses	...	...	...	...	...	...	...	...	17
Drainage	...	...	...	...	...	...	...	...	77
Offensive Trades	...	...	...	...	...	...	...	...	23
Common Lodging House	...	...	...	...	...	...	...	...	16
Temporary Dwellings	...	...	...	...	...	...	...	...	9
Rats and Mice	...	...	...	...	...	...	...	...	895
Shops	...	...	...	...	...	...	...	...	398
Infectious Diseases	...	...	...	...	...	...	...	...	59
Houses	...	...	...	...	...	...	...	...	2,147
Slaughter Houses	...	...	...	...	...	...	...	...	29
Ice Cream Premises	...	...	...	...	...	...	...	...	218
Restaurants and Cafes	...	...	...	...	...	...	...	...	32
Other Food Premises	...	...	...	...	...	...	...	...	79
Cowsheds, Dairies and Milk Shops	...	...	...	...	...	...	...	...	21
Smoke Inspections	...	...	...	...	...	...	...	...	42
Miscellaneous	...	...	...	...	...	...	...	...	29
Vermin Infestations	...	...	...	...	...	...	...	...	177
Hairdressers	...	...	...	...	...	...	...	...	27

Complaints

The number of complaints received during the year was 694, the majority of which were relating to housing defects.

Housing

The major portion of the work of the Department was devoted to housing. It was found that owing to shortage of housing accommodation Slum Clearance would be necessarily slow and this was very disappointing as it meant that most of the town's sub-standard property would be standing for quite some considerable time yet. The Clayfield Road and New Street Compulsory Purchase Orders were confirmed after Public Inquiry but there was no housing accommodation ready and by the end of the year it looked as if it would be at least another year before the necessary houses were provided.

Action was taken in 9 other cases under Section 11 of the Housing Act 1936 and demolition orders were made. The families were rehoused by the Council. Representations in respect of 19 other houses at Wragby Row were made to the Council for action under Section 25 of the Housing Act, 1936 during the latter part of the year. The process of first aid repairs to typical slum clearance type property is a tedious one and it is felt that this is work out of which little satisfaction is obtained. The Council's five year Slum Clearance programme included 294 houses and several of these were to have been scheduled in 1939. These houses have had another 16 years of life and several of them are in a very sub-standard condition. It was also noted during the year that mining subsidence seems to be on the increase and more and more houses have been affected.

As in previous years the number of owner occupiers increased and 53 loans under the Small Dwellings Acquisition Act were made to purchasers.

The total number of houses in the district was 5,306 and the total number of new houses erected in the year by the Local Authority was 44. 26 houses are back-to-back type. 476 houses were inspected for housing defects and 1,742 inspections were made for the purpose. 328 houses were rendered fit after informal action and 82 repairs were remedied after service of notices under Section 93 of the Public Health Act, 1936. It was not found necessary to seek Court Action in any case.

List of Statutory Notices served :—

Section 39 Public Health Act, 1936	...	...	2
Section 45	„	„	3
Section 93	„	„	74
Section 56	„	„	5

A total of 1,093 repairs were carried out to 410 houses and defects remedied are listed below :—

Chimneys repaired	...	44	Miscellaneous	...	56
Eaves Gutters repaired	56		Roofs repaired	...	193
Damp Walls remedied	27		Walls repaired	...	42
Steps repaired	...	1	Windows repaired	...	74
Plaster renewed	...	140	Doors repaired	...	16
Waste Pipes renewed	...	5	Sinks renewed	...	14

Ranges repaired 110	Coppers renewed ... 7
Floors repaired 29	Fire Backs renewed ... 6
Choked Drains released 74	Water in Cellars 45
Drains renewed ... 1	Drains reconstructed ... 14
Manholes renewed ... 1	Gullies renewed ... 2
Smoke Nuisances remedied 1	Manholes reconstructed 1
Rain Water Pipes	Yard Paving renewed 11
renewed 11	W.C.'s repaired 112

TOTAL : 1,093.

Total of houses inspected for defects 476
Total defects found 1,152
Total defects remedied 1,093
Number of houses in district 5,306

Overcrowding

There has been no overcrowding survey for several years and the full state of overcrowding is not known, though it has been noticed that overcrowding has decreased considerably since the end of the war.

Tents, Vans, Sheds

Two temporary licences were issued in respect of living vans during the year. No nuisances were caused.

Common Lodging House

16 inspections of the Common Lodging House, Lees Buildings were made. Most of the inmates were men, particularly from Ireland, who had moved into the district to work on civil engineering jobs, and there were only two or three elderly persons. The standard of the house deteriorated and representations were made to the keeper to improve the amenities available to the occupants.

Dirty and Verminous Premises

A slight improvement was evident in some of the known problem families. There was no case which merited Court action but it was found that tedious visiting by the Health Visitors and the staff of this Department was necessary. All prospective Council tenants were vetted and it was only found necessary to delay the immediate occupation of a Council house by one family.

The standard of cleanliness in Council houses was reasonably satisfactory, and it was only in some of the sub-standard properties, that the home conditions were deteriorating. It was felt that in some cases the house itself and the shortage of accommodation for large families were factors which contributed to the lowering of the standard.

There was an increase in cockroach infestations. The process of treatment is a lengthy one and although free insecticides are provided to the tenants concerned, it is felt that they lose heart and lose the fight. Bug infested premises, are found to be much fewer than they were a few years ago. The following verminous premises were treated :—

Bug infested properties (including precautionary treatment)	...	30
Cockroach infestations	... ..	82
Carpet Moth	... ..	1
Silverfish	... ..	4
Flies	... ..	7
Wasps	... ..	1
Beetles	... ..	2

Rodent Control

The Rodent Operator covered the town thoroughly during the year and it was found that allotment premises again were the chief centre of infestations. This, of course, is due no doubt to the large number of pigs which are kept there by small pigkeepers. The 10% test of sewers was carried out at the request of the Ministry of Agriculture and Fisheries, and again it was found that in one small area only, was it necessary to institute block control. There appeared to be an increase in mice infestations, but most of these were small and of nuisance value only. Regular surveys were made of the Pastures Road tip and the Sewage Farm, and treatment given where necessary.

There was full co-operation by ratepayers during the year and it was found unnecessary to take legal action.

Number of rat infested premises and treated	...	99
Number of baiting points	... ..	835
Pre-baits laid	... ..	625
Post-baits showing infestation clear	... ..	761
Rat bodies recovered	... ..	417
Mice-infested premises	... ..	80
Mice bodies recovered	... ..	722

Atmospheric Pollution

Atmospheric Pollution continued to be a subject of great concern in Mexborough. Records were compiled from readings taken from eight lead peroxide instruments and a deposit gauge. Recordings of sulphur dioxide were heavier during the winter months and though some of the figures were lower than those of the previous year during the same period, there tended to be high readings towards the end of the year. Deposit gauge readings varied from 8.46 tons per month per square mile in July to 22.64 tons in June. There was no record in February because of damage to the instrument. It would appear that there was a slight increase in the pollution in the district over that of the previous year, and there is no doubt that the new Centralisation Plant at Manvers Main Colliery is contributing a certain amount to this. It will be interesting to compare figures in a few years when the new plant is working fully. The extension to the Generating Station, with the erection of another chimney, is also likely to be a further source of pollution in the Urban District.

The chimney at the Denaby Main Colliery still proved itself to be a very serious nuisance, though the National Coal Board are planning to electrify the Colliery over the next few years. Approaches were made to the Conisborough Urban District Council with a view to a reduction in the amount of black smoke emitted from the Colliery.

The automatic coking stokers installed at the Montagu Hospital decreased the amount of smoke produced there.

During the year, complaints were received from rate-payers regarding an unpleasant odour which was evident in the summer months and when the wind was in the south westerly direction. This smell had its source in the Swinton Urban District and approaches were made to Swinton on the matter.

It is felt that over the next few years the pollution of the atmosphere in this area will increase particularly from the new plants being erected on the east and west sides. Attempts have been made by the Council to reduce pollution by the installation of modern appliances in Council houses, but the pollution from industrial sources is no doubt on the increase. The readings of the lead peroxide gauges and deposit gauge are below :—

The lead peroxide instruments and deposit gauge readings are enclosed.

SULPHUR GAUGE READINGS — 1955

Wt. Ba SO₄.

Period	Station	Area Exposed in Sq. Cm.	In Sample (Mg)	In Control (Mg)	Due to Exposure (Mg)	Wt of SO ₃ collected Mg/100 sq.cm/day
Jan. 1955	Bailey	97·0	309·0	10·0	299·0	3·41
	Denaby	98·0	295·0	10·0	285·0	3·22
	Hanby	96·0	207·0	10·0	197·0	2·27
	Market Hall	97·0	364·0	10·0	354·0	4·04
	Sewage Farm	97·0	292·0	10·0	282·0	3·22
	Water Tower	95·0	396·0	10·0	386·0	4·50
	1st Y.E.P.	97·0	253·0	10·0	243·0	2·78
	2nd Y.E.P.	98·0	308·0	10·0	298·0	3·37
Feb. 1955	Bailey	95·0	246·0	17·0	229·0	2·96
	Denaby	98·0	177·0	17·0	160·0	2·00
	Hanby	97·0	171·0	17·0	154·0	1·95
	Market Hall	98·0	256·0	17·0	239·0	2·99
	Sewage Farm	97·0	195·0	17·0	178·0	2·25
	Water Tower	96·0	320·0	17·0	303·0	3·87
	1st Y.E.P.	96·0	214·0	17·0	197·0	2·52
	2nd Y.E.P.	98·0	255·0	17·0	238·0	2·98
March 1955	Bailey	98·0	242·0	11·0	231·0	2·61
	Denaby	99·0	185·0	11·0	174·0	1·95
	Hanby	97·0	161·0	11·0	150·0	1·71
	Market Hall	99·0	236·0	11·0	225·0	2·52
	Sewage Farm	100·0	193·0	11·0	182·0	2·02
	Water Tower	99·0	285·0	11·0	274·0	3·04
	1st Y.E.P.	100·0	198·0	11·0	187·0	2·07
	2nd Y.E.P.	99·0	224·0	11·0	213·0	2·38
April 1955	Bailey	97·0	181·0	15·0	166·0	1·90
	Denaby	99·0	153·0	15·0	138·0	1·54
	Hanby	99·0	135·0	15·0	120·0	1·34
	Market Hall	99·0	191·0	15·0	176·0	1·97
	Sewage Farm	98·0	170·0	15·0	155·0	1·75
	Water Tower	98·0	279·0	15·0	264·0	2·98
	1st Y.E.P.	99·0	159·0	15·0	144·0	1·61
	2nd Y.E.P.	99·0	180·0	15·0	165·0	1·84
May 1955	Bailey	99·0	186·0	5·0	181·0	2·09
	Denaby	99·0	125·0	5·0	120·0	1·39
	Hanby	97·0	130·0	5·0	125·0	1·48
	Market Hall	97·0	183·0	5·0	178·0	2·10
	Sewage Farm	98·0	153·0	5·0	148·0	1·73
	Water Tower	99·0	219·0	5·0	214·0	2·37
	1st Y.E.P.	98·0	55·0	5·0	50·0	0·58
	2nd Y.E.P.	99·0	190·0	5·0	185·0	2·14
June 1955	Bailey	97·0	139·0	10·0	129·0	1·52
	Denaby	97·0	98·0	10·0	88·0	1·04
	Hanby	97·0	94·0	10·0	84·0	0·99
	Market Hall	98·0	139·0	10·0	129·0	1·51
	Sewage Farm	98·0	114·0	10·0	104·0	1·21
	Water Tower	97·0	187·0	10·0	177·0	2·09
	1st Y.E.P.	98·0	100·0	10·0	90·0	1·05
	2nd Y.E.P.	98·0	133·0	10·0	123·0	1·44

SULPHUR GAUGE READINGS — 1955 (cont.)

Wt. Ba SO₄.

Period	Station	Area Exposed in Sq. Cm.	In Sample (Mg)	In Control (Mg)	Due to Exposure (Mg)	Wt of SO ₃ collected Mg/100 sq.cm/ day
July 1955	Bailey	98·0	110·0	10·0	100·0	1·10
	Denaby	99·0	80·0	10·0	70·0	0·76
	Hanby	98·0	74·0	10·0	64·0	0·71
	Market Hall	97·0	116·0	10·0	106·0	1·17
	Sewage Farm	99·0	108·0	10·0	98·0	1·06
	Water Tower	98·0	150·0	10·0	140·0	1·53
	1st Y.E.P.	99·0	66·0	10·0	56·0	0·61
Aug. 1955	2nd Y.E.P.	98·0	116·0	10·0	106·0	1·16
	Bailey	98·0	101·0	12·0	89·0	1·04
	Denaby	99·0	89·0	12·0	77·0	0·89
	Hanby	97·0	75·0	12·0	63·0	0·74
	Market Hall	98·0	127·0	12·0	115·0	1·34
	Sewage Farm	100·0	96·0	12·0	84·0	0·96
	Water Tower	98·0	129·0	12·0	117·0	1·37
Sept. 1955	1st Y.E.P.	100·0	65·0	12·0	53·0	0·60
	2nd Y.E.P.	99·0	115·0	12·0	103·0	1·19
	Bailey	98·0	196·0	5·0	191·0	2·23
	Denaby	99·0	121·0	5·0	116·0	1·34
	Hanby	97·0	124·0	5·0	119·0	1·40
	Market Hall	98·0	182·0	5·0	177·0	2·07
	Sewage Farm	100·0	180·0	5·0	175·0	2·00
Oct. 1955	Water Tower	98·0	215·0	5·0	210·0	2·45
	1st Y.E.P.	100·0	119·0	5·0	114·0	1·30
	2nd Y.E.P.	99·0	182·0	5·0	177·0	2·05
	Bailey	98·0	235·0	12·0	223·0	2·52
	Denaby	98·0	150·0	12·0	138·0	1·56
	Hanby	97·0	148·0	12·0	136·0	1·55
	Market Hall	98·0	222·0	12·0	210·0	2·37
Nov. 1955	Sewage Farm	97·0	189·5	12·0	177·5	2·03
	Water Tower	98·0	177·0	12·0	165·0	1·87
	1st Y.E.P.	98·0	67·0	12·0	55·0	0·62
	2nd Y.E.P.	99·0	227·0	12·0	215·0	2·41
	Bailey	95·0	290·0	7·0	283·0	3·41
	Denaby	100·0	230·0	7·0	223·0	2·55
	Hanby	95·0	266·0	7·0	259·0	3·12
Dec. 1955	Market Hall	102·0	166·0	7·0	159·0	1·78
	Sewage Farm	93·0	286·0	7·0	279·0	3·43
	Water Tower	95·0	433·0	7·0	426·0	5·13
	1st Y.E.P.	100·0	162·5	7·0	155·5	2·78
	2nd Y.E.P.	95·0	266·5	7·0	259·5	3·13
	Bailey	95·0	306·0	4·0	302·0	3·41
	Denaby	100·0	290·0	4·0	286·0	3·07
	Hanby	95·0	219·0	4·0	215·0	2·43
	Market Hall	102·0	351·0	4·0	347·0	3·65
	Sewage Farm	93·0	406·0	4·0	402·0	4·64
	Water Tower	95·0	443·0	4·0	439·0	4·97
	1st Y.E.P.	100·0	196·0	4·0	192·0	2·60
	2nd Y.E.P.	95·0	290·0	4·0	286·0	3·23

DEPOSIT GAUGE READINGS - PERIOD JANUARY - DECEMBER, 1955.

Site of Gauge — In front of the Urban District Council Offices, corner of Adwick Road and Doncaster Road, Mexborough.

Gauge Number — D.326.

Metric Factor — (g. deposit to g/100 mi. 2) . 1302.

British Factor — (g. deposit to tons/mi. 2) 33.19

Analysis of Matter Collected in Atmospheric Deposit Gauge per Calendar month		Jan.	Feb.	March	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
WATER	m.m. rain	37.0		58.0	15.0	63.0	64.0	17.0	6.0	38.0	36.0	46.0	48.0
pH Value		4.2		4.4	6.1	5.4	5.2	6.2	7.2	6.2	3.6	4.7	4.3
TOTAL WATER —	tons per sq. mile												
INSOLUBLE MATTER		7.27	No Record										
Soluble in CS2		0.07		5.97	10.75	7.83	10.22	4.51	13.34	13.20	10.79	9.16	11.75
Ash		5.14		0.07	0.13	0.07	0.07	0.07	0.07	0.23	0.17	0.10	0.20
Other Combustible Matter.....		2.06		3.81	7.73	5.47	6.54	2.72	8.00	9.09	7.33	5.74	7.47
TOTAL WATER —				2.09	2.89	2.29	3.61	1.72	5.27	3.88	3.29	3.32	4.08
SOLUBLE MATTER.....		5.81		6.57	6.11	8.60	12.41	3.95	4.41	9.63	4.81	9.36	10.36
Ca + +		0.60		0.60	0.66	0.93	1.19	0.32	0.56	1.03	0.70	0.90	0.76
Cl'		1.79		1.19	0.73	0.56	1.77	0.40	0.56	1.36	1.26	1.23	1.99
SO4		2.36		2.59	2.19	2.72	5.54	1.19	1.76	3.65	2.49	3.39	3.58
TOTAL SOLIDS	tons per sq. mile	13.08		12.55	16.86	16.43	22.64	8.46	17.76	22.83	15.60	18.52	22.10

Food Inspection

The Council agreed in principle to licence three private Slaughter Houses providing these were brought to a satisfactory standard. Two of the owners agreed to carry out the necessary works before application for licences, but the slaughter house improvements were not completed by the end of the year. The meat in the town, therefore, was purchased dead weight from markets outside the district.

The usual routine visits were made to shops and wholesale dealers' premises for the inspection of foodstuffs, and attention was also given to the preparation of foodstuffs in cafes and snack bars.

There were two complaints during the year of sale of unsound foodstuffs, one concerning a small piece of flour bag found in a loaf of bread and the other a common fly in a pork pie. Both items of foodstuffs were seized and taken before a Justice of Peace for condemnation but owing to a High Court decision in a similar case the Council decided not to prosecute the vendors.

There were no cases of food poisoning during the year. Inspections of 22 cottagers' pigs were carried out after slaughter.

The following foodstuffs were found unfit for human consumption and destroyed :—

CONDEMNED FOOD - 1955

Beef Sausage, 32 lbs.	Gammon, 21 tins; 2 lbs.
Crawfish, 11 tins	Strawberries, 41 tins
Beans, 32 tins	Bacon, 434 lbs.
Jellied Veal, 13 tins	Cherries, 4 tins
Tomato Juice, 9 tins	Fishcakes, 34
Boiled Ham, 18 lbs.	Raspberries, 21 tins
Plums, 13 tins	Peas, 44 tins
Apricots, 29 tins	Beef Loaf, 9 tins
Soup, 15 tins	Minced Meat, 2 jars

Sauce, 1 bottle	Crab Meat, 5 tins
Salmon, 7 tins	Fruit Salad, 14 tins
Pineapple, 38 tins	Oranges, 17 tins
Pickles, 4 jars	Pork Sausages, 74 lbs.
Gooseberries, 17 tins	Pilchards, 29 tins
Cornflakes, 4 pkts.	Pudding Mix, 6 pkts.
Marmalade, 30 jars	Rolled Oats, 6 lbs.
Chicken Broth, 1 tin	Rhubarb, 1 tin
Jam, 3 jars	Pears, 11 tins
Flour, 3 lbs.	Silds, 140 tins
Grapefruit, 11 tins	Sultanas, 2 lbs.
Malted Milk, 1 tin	Fruit Pudding, 1 tin
Blackberries, 2 tins	Peaches, 29 tins
Damsons, 6 bottles	Cake, 75 lbs.
Figs, 10 lbs.; 9 tins	Biscuits, 1 pkt.
Lunch Meat, 35 tins; 17 lbs.	Corned Beef, 41 tins; 15 lbs.
Fish, 3 stone	Stewed Steak, 14 tins
Beans and Sausage, 1 tin	Mixed Veg., 1 tin
Beetroot, 1 jar	Carrots, 4 tins
Kidneys, 28 lbs.	Crabs, 38 lbs.
Sardines, 1 tin	Liver, 28 lbs.
Red Cabbage, 1 jar	Tongue, 45 tins, 6 lbs.
Butter, 18 lbs.	Onions, 1 jar
Beef, 102 lbs.	Chicken & Ham Paste, 1 tin
Macaroni, 2 tins	Choc Mallows, 3 dozen
Tomatoes, 593 tins	Prunes, 2 tins
Milk, 83 tins	Shoulder Ham, 25 tins;
Currants, 77 lbs.	22 lbs. 2 ozs.
Blackcurrants, 1 tin	Raisins, 5 pkts.
Tuna Fish, 3 tins	Lemon Curd, 1 jar
Cheese, 376 lbs. 13 ozs.;	Herrings, 1 tin
4 pkts.	Piccalilli, 1 jar

Slaughter of Animals Act, 1933

7 licences to stun or slaughter animals were issued during the year, and no offences were found.

Food Premises

The food preparing premises within the Urban District were as follows :—

Bakehouses	...	...	...	...	...	...	4
Tripe Boilers	...	...	...	...	...	...	1
Preparation and manufacture of sausage, pressed, pickled or preserved foods	...						10
Fish Friers	...	...	...	...	...	...	22

These premises were inspected on several occasions, and there was no cause for serious complaint.

Four modern, permanent fish stalls were erected in the Council owned market, and all fish was sold under hygienic conditions. The standard of cleanliness in the food shops in the town was a good one and on the whole, it was found that food traders were eager to co-operate with the Department in endeavouring to ensure that foodstuffs reached the consumer in a very good condition.

Ice Cream

There were 72 premises registered for the sale of Ice Cream during 1955 and there was also one registered for the manufacture of Ice Cream. A total of 218 inspections of the registered premises were made, and all premises were provided with hot and cold water and washing facilities. All Ice Cream sold in shops was wrapped, and the products were supplied by four or five big manufacturers. 12 samples were submitted for bacteriological examination and 7 were placed in Grade I, 3 in Grade II, 1 in Grade III and 1 in Grade IV. The manufacture of lollipops on a big scale in the town was discontinued.

Shops Act, Section 38, 1950

398 visits were paid to shops under the above mentioned section and 3 unsatisfactory conditions were found and these were remedied.

Milk Production

There were 47 registered milk distributors and all milk was bottled. There were three complaints regarding dirty milk bottles dealt with during the year. The following licences for the sale of milk were in operation :—

Supplementary Licences (Pasteurised)	...	...	3
„ „ (Sterilised)	...	...	2
„ „ (Tuberculin Tested)	...		2
Dealers' Licences (Sterilised)	...	...	2
„ „ (Pasteurised)	...	...	Nil
„ „ (Tuberculin Tested)	...	...	Nil

Factories

There were 65 factories on the register, 52 with power and 13 with non power. There were two registrations of works of Engineering Construction. A total of 73 inspections were made and the following defects were found and remedied:

Insufficient Sanitary Conveniences	...	...	2
Defective Conveniences	...	...	4

Hairdressers

There were 31 registered hairdressers in the Urban District and 27 visits were made. The standard of cleanliness was reasonably satisfactory, but it is hoped in the near future to give more attention to these premises.

Public Cleansing - Refuse Collection

Refuse collection was carried out with a staff of 20 employees working with 5 Karrier Bantam Vehicles. It was evident, that with the erection of new houses and the increase of shop refuse, that another vehicle would have to be purchased and put into operation. The question of suitable manpower was again an important one and with a heavy sickness list, together with absenteeism, holidays and many unsuitable employees, the service was handicapped. The very nature of the work and the low remuneration, as compared with that in other local industries, tended to restrict the suitable labour available. It was not possible to maintain a weekly service during the year in every part of the town, and often overtime had to be put into operation, when some of the rounds were found to be seriously behind. The employees were provided with protective clothing for their very onerous tasks. It was realised that reorganisation would have to take place in the near future. A total of 222,547 bin premises were serviced and 4,198 loads of refuse dealt with. In addition there were 872 loads of trade refuse. During the summer months the 19 pail closets at Wragby Row were emptied twice a week and once weekly for the rest of the year.

It is apparent that the number of trade refuse loads is growing fast, as can be seen by the following figures :—

1955	...	...	...	872
1954	...	...	...	681
1953	...	...	...	372
1952	...	...	...	429
1951	...	...	...	455
1950	...	...	...	433

In 1945, 10 years ago, the number of trade refuse loads was 204, less than a quarter of the 1955 figure.

A total of 526 bins were renewed under the Municipal Bin Scheme.

Refuse Disposal

Refuse continued to be deposited by controlled tipping at the Pastures Road tip. This site is one acquired under agreement from the National Coal Board. As the tip is situated away from the town, the site was often visited by trespassers raking over deposited refuse and on occasions fires were started.

The total cost of refuse collection and disposal was approximately £12,952. This figure is increasing because of the growth of the town and wage increases to employees.

Salvage

Income from salvage was £769/0/3d. This amount was £103 more than that for the previous year, and was accumulated chiefly by the sale of waste paper. The weight of waste paper recovered was 89 tons 12 cwts. 3 qrs.

Conclusion

The Urban District has many problems to face at the present time and in the near future. Difficulties with new housing sites have slowed the rate of new house building and consequently the rate of Slum Clearance. The town has a big Slum Clearance programme and it is very disappointing to find, that after the war years of first aid repairs carried out to many worn out cottages, these houses are to remain with us a little longer. The Clayfield Road and New Street Clearance Areas were confirmed by the middle of 1955 and at the time of writing this report, 12 months after, the tenants of these areas have still not been rehoused. The properties are deteriorating

very badly, and on occasions informal approaches have had to be made to agents and landlords to induce them to carry out necessary repairs to property which has already been condemned. Several of the houses included in the Slum Clearance programme are 100 years and upwards in age, with bulging walls, and it is a matter of opinion as to how long these houses will stand in an area already widely affected by mining subsidence. On the other hand, after rehousing takes place, there will no doubt have to be strict supervision over some of the problem families who now are occupying sub-standard houses, and it is often felt that a policy of "half way houses" may be the answer to an attempt at rehabilitation in these cases. I myself would like to see the Slum Clearance programme proceeding at a much faster rate than at present.

The question of insufficient water supply has now been settled by the buying of bulk supplies from the Sheffield Corporation, but I feel that the problem of sewage disposal is one that must be faced in the very near future. The sewers of the town are very old and have not the capacity for the amount of sewerage which they are expected to take, and at periods of heavy rain, there inevitably occurs a surcharging of the sewers and flooding in certain parts of the town. The position was eased by the laying of a new surface water sewer in the South West corner of the town, but quite a lot of money will have to be spent to bring the whole system up to a good standard. This would include modernisation of the Sewage Works which are hopelessly out of date, and insufficient for the job involved.

Atmospheric pollution was again evident in the District, and it is felt that over the years, this has been increased with extensions to the Electricity Works and the huge Centralisation Scheme at Manvers Main Colliery. The nationalised industries, in this District, any way, are big offenders and a national, rather than a local policy is needed to cut down the amount of pollution.

Refuse collection also causes some anxiety, as it is never known when a full staff can be operated. Some of the man power available for this work is not labour of the best type, and absenteeism and sickness are enemies which have to be overcome to maintain an efficient service. Before the war there was a waiting list of good type labourers ready to take their place in the Council service, but today those same labourers or their modern counterparts are attracted to more remunerative employment available in the District.

I record that Dr. J. Leiper, Medical Officer of Health, terminated his appointment on the 31st January, 1955 and that for the rest of the year Dr. B. R. A. Demaine, Deputy Medical Officer of Health, acted as Medical Officer. Again, I would like to record my appreciation of the value and help of Dr. Demaine during the year, and her co-operation in the many problems which have arisen. I also wish to thank the Chairman and Members of the Public Health Committee for their support, and also the members of the staff in my own Department for their interest and keenness during the year, and for their assistance in the preparation of this report.

I remain,

Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant,

H. BREARLEY,

Chief Sanitary Inspector.

Cert. S.I.B., M.S.I.A., Cert. Inspector
of Meat and Other Foods.

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